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Dr. Brian Hooker's Damning Testimony Against All Vaccines



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From Wikipedia, the free encyclopedia

Brian S. Hooker a biologist and chemist who was department chair and Professor Emeritus of Biology at [Simpson University](#). He is known for promoting the false claim that [vaccines cause autism](#).



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"My name is Dr. Brian Hooker, and I am a vaccine safety scientist serving as a chief scientific officer of Children's Health Defense. I'm also the father of a severely

vaccine injured adult son."

Camus 

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Dr. Brian Hooker's damning testimony against all vaccines
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Transcript

"This slide shows the expansion of the infant child vaccination schedule since 1962, as recommended by the CDC. Multivalent vaccines are counted based on the number of disease antigens. For example, the MMR vaccine counts as three doses.

In 1962, children received five vaccine doses, and in 1986, the schedule expanded to 25 doses of five different vaccine formulations.

Shortly after the passage of the 1986 National Childhood Vaccine Injury Act, the law was amended to essentially erect a liability shield protecting vaccine and the schedule expanded dramatically. By 2023, 73 doses of 16 different vaccine formulations were given to children up to age 18.

The FDA approved these formulations individually only with minimal and inadequate safety testing, and the CDC has never tested the cumulative effect of the vaccine schedule on childhood health outcomes. However, independent researchers have assessed the outcomes of vaccinated versus unvaccinated children.

This slide shows the results of a paper that Neil Miller, a medical journalist, and I published in the journal Sage Open Medicine in 2020. Here, only vaccines given during the first year of life were considered. Any child who received one vaccine or more during the first year of life was considered vaccinated, and any child who received no vaccines during the first year of life was considered unvaccinated.

Deidentified records were taken directly from three medical practices in different locations within the US. The odds ratios or likelihood of a diagnosis is shown on the graphic. This demonstrates that vaccinated children were at least twice as likely to be diagnosed with developmental delays, ear infections, and gastrointestinal disorders.

The likelihood of an asthma diagnosis among the vaccinated group was 4.5 times higher than the unvaccinated group. Next slide, please. Affirming and extending these results is a study completed by Joy Garner of the control group that was published in the International Journal of Vaccine Theory Practice and Research in 2022.

Here, a control group of over 1,800 unvaccinated children recruited from 46 different states in the US were compared to the national average rates of the listed

disorders. The national averages represent a population of children where 99.7% of the participants are vaccinated. Incidence of each disorder is shown as a percentage of each group of children on the graphic.

For each of the autoimmune, neurodevelopmental, and other disorders considered, the unvaccinated group fares much better with incidence rates between four and 20 times lower than their vaccinated counterparts. Next slide, please.

This is a comparison of the myocarditis diagnosis rates following the COVID-19 mRNA vaccines given during the pandemic. The first graphic on this slide is from a paper published by Mazzari et al. in the Journal Plus Medicine in 2022. It shows the incidence of myocarditis and pericarditis diagnoses within seven days of receiving either the first or second dose of the Moderna vaccine versus the unvaccinated control group, four males between 12 and 39 years of age.

The second graphic on the slide is from a paper published by Mvorak et al in the New England Journal of Medicine in 2021. It shows the incidence of myocarditis within 30 days of receiving the second Pfizer vaccine in the general population, as well as for 16 to 19 year old boys compared to unvaccinated controls.

Myocarditis is a serious disorder and 76% of all cases following COVID vaccination, as reported by VAERS, requires emergency care and or hospitalization. CDC significantly downplays myocarditis as a side effect of the vaccine. Vaccine injury is neither minor nor rare.

The 1986 National Childhood Vaccine Injury Act requires that the Department of Health and Human Services report to Congress on the state of vaccine safety in the U.S. every two years. It's been almost 40 years since the 1986 act was passed, and HHS has never submitted a vaccine safety report to Congress. Federal authorities are derelict in their duty to protect the people of the United States from debilitating and often life-changing vaccine adverse events. Thank you."

Image: [Source](#) Screen Shot Showing Lies From Wikipedia

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